APPLICATION FOR AMENDED CERTIFICATE OF AUTHORITY

(Non-Profit Corporations)

John A. Gale, Secretary of State Room 1301 State Capitol, P.O. Box 94608 Lincoln, NE 68509 http://www.sos.state.ne.us

Submit in Duplicate

Attach a certificate stating the name change amendment duly authenticated by the official having custody of the corporate records in the state or country under whose law it is incorporated. Such certificate shall not be more than 60 days old.

Name of Corporation				
Incorporated under the laws of				
Amended Name of Corporation				
Date Incorporation	, Period of	Duration	n	
Corporate Type (check one) Pub		tual Bene	efit	_ Religious
Does the Corporation Have Members?	? Yes N	0		
Address of Principal Office				
Street Address Registered Agent	City		Zip	
Registered Office			NE_	
Street Address and Post Off	fice Box (if any) City			Zip
DATED				
	Signature			
	Printed Name/Title			-

NOTE: Every filing must be signed by the chairperson of the board of directors, the president, or one of the officers of the corporation. If the corporation has not yet been formed or directors have not yet been selected, the filing shall be signed by an incorporator. If the corporation is in the hands of a receiver, trustee, or other court appointed fiduciary, the filing shall be signed by that fiduciary.

FILING FEE: \$15.00